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Bib Data Sheet

CONFIRMATION NO. 5832

<b>SERIAL NUMBER</b> 09/921,641	<b>FILING OR 371(c) DATE</b> 08/03/2001 <b>RULE</b>	<b>CLASS</b> 381	<b>GROUP ART UNIT</b> 2643	<b>ATTORNEY DOCKET NO.</b> MITEL.005A
<b>APPLICANTS</b> Remi LeReverend, San Diego, CA;				
** CONTINUING DATA ***** NONE				
** FOREIGN APPLICATIONS ***** NONE				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 09/08/2001				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance <input checked="" type="checkbox"/> Verified and Acknowledged <input checked="" type="checkbox"/>		STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 15
Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 3		
<b>ADDRESS</b> 20995				
<b>TITLE</b> System and method for reducing hearing aid squeal				
<b>FILING FEE RECEIVED</b> 870	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	